

# ***Northwestern Medical Center Emergency Department Pilot Project: A Presentation to the Green Mountain Care Board***



***Jane Catton, Sr. VP/COO  
Scott Bork, Interim Director Primary Care  
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# Background

- NMC's service area identified by The Dartmouth Institute Data as having one of the highest per capita ED utilizations in New England of 539.4 per thousand visits whereas the overall state rate was 387.<sup>1</sup>
- Translates to over 28,000 visits per year

*NMC has had a 173% increase in its two lowest level ED visits between 2010 and 2012.*

## ***What is driving Utilization?***

- Highly efficient NMC ED is appealing to patients needing primary care.
- NMC service area identified as having a primary care provider shortage.
- Patient/community culture: "Immediate attention to health care needs".

<sup>1</sup>2008 Emergency Department Hospital Utilization Report prepared by the Vermont Department of Health and the Department of Banking, Insurances, Securities and Health Care Administration.



# Pilot Project Overview

## Goals:

- Implement interventions designed to decrease inappropriate visits to the ED; *“Reduce Avoidable Visits”*
- Implement Care Management (CM) model to support transition of patients to primary care or community services for care in the appropriate setting, leading to more consistent and affordable care.

# Pilot Project: Key Areas of Focus

- Implement intensive CM in the NMC ED five days per week.
- All patients with charge level 1 or 2 (lowest acuity levels) must be reviewed by Care Manager before discharge.
- Care Manager linkages to other care managers within the system to wrap around patients/follow up.

# Pilot Project: Key Areas of Focus

- Care team follow-up as needed and coordinated with Primary Care/Blueprint.
- Sharing data and results with Primary Care Offices and NOTCH to continue to drive improvements.

# Shared Savings

Focus is to initially develop shared savings programs for Medicaid and Blue Cross which make up approx. 64% (1,400) of the two lowest level visit categories in our ED.

## Goal:

Reduce avoidable visits for all payors as follows in year one of Pilot:

- Level 1 and 2: **35% of 2,181 = 763 visits**
- Level 3: **10% of 6,001 = 600 visits**
- Total reduction in ED visits Year 1: **1,363 (approx. 5% of total ED visits)**

# Medicaid Shared Savings

If Medicaid targets are achieved, we estimate cumulative Medicaid net revenue reductions as follows:

Yr. 1 - \$179,000

Yr. 2 - \$320,000

Yr. 3 – \$437,000

To be shared by the State and NMC as follows:

1<sup>st</sup> \$100,000 – 100% to State

2<sup>nd</sup> \$100,000 – 100% to NMC

Amounts over \$200,000 – shared equally by State/NMC

# Accomplishments

## January- July 2013:

- RN Care Manager hired: has managed over 1,000 patient visits to date.
- Data management tools developed and data tracked monthly.
- Educated managers, staff and medical services (PCPs) and rolled out to ED, all services and Blueprint partners.
- Implemented pilot model and team evaluating progress weekly.
- Communications in local newspaper and radio, online and direct mail: “Call First”.



# Accomplishments

- Continued partnership and follow-up with BC/BS, NCSS , primary care, Blueprint offices and NOTCH.
- Re-evaluating strategies: What is working, what isn't.
- Presentations to Leadership and ED staff.
- ED avoidable visit volume reduced by 4.72% overall since January 2013 against 7% target for Medicaid visits and a 5% target for overall ED visits.

# Outcomes: Our Results

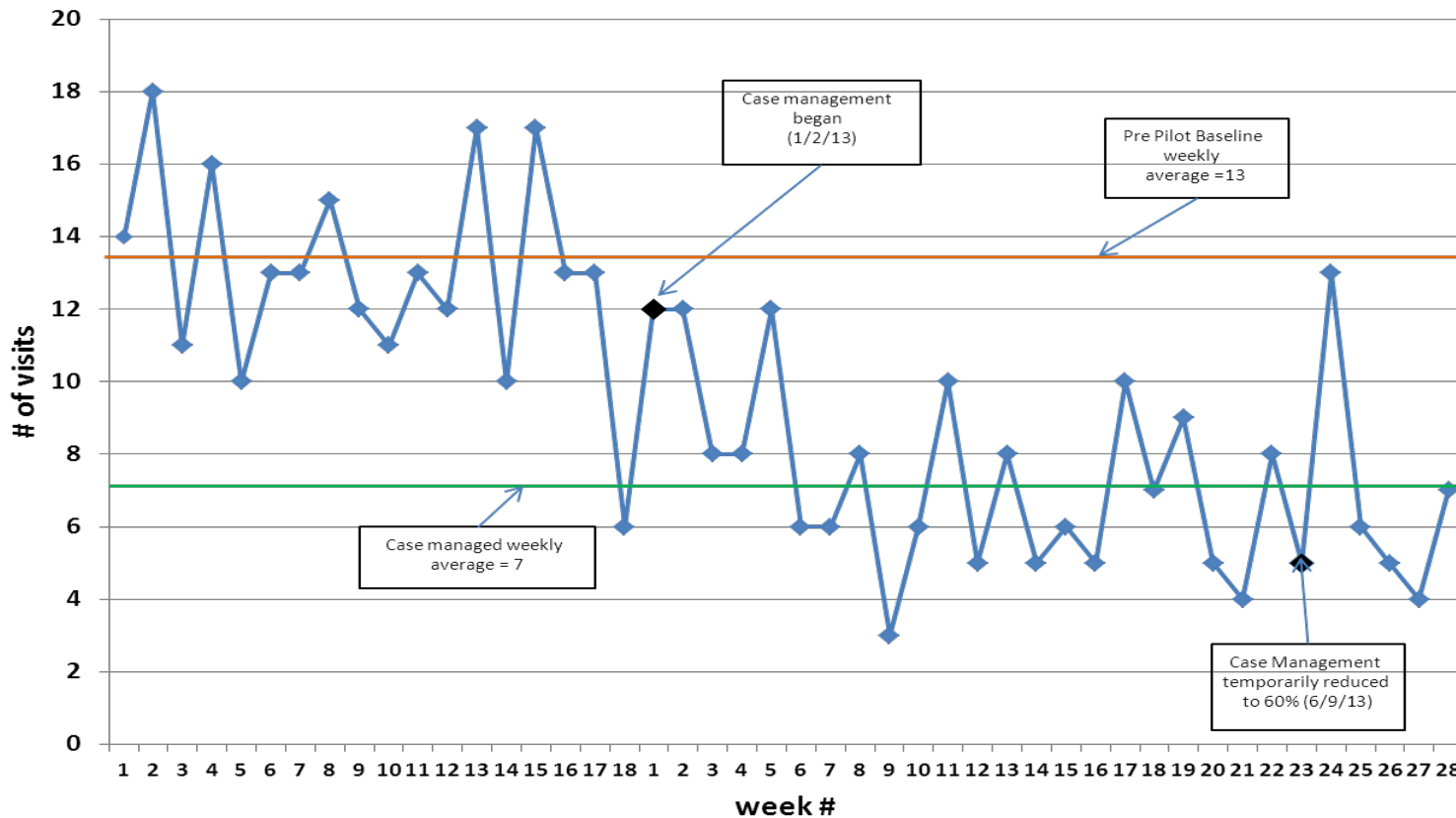
## Sample Baseline Data:

- Number of patients managed by Care Manager to date: 1,000
- Average % of level 1's and 2's seen by Care Manager: 95% (monthly range 86%-99%)
- Average % of patients without a PCP: 16% (monthly range 12-22%)
- % of patients referred to a PCP by Care Manager: 100%
- 'Avoidable' revisit rate within 30 days: 21% (monthly range 10-30%)
- Average % of patients who called their PCP first (prior to ED visit): 27% (monthly range 23-38%)
- Top reasons why patients did not go to PCP:
  - Appointment time too far out
  - Appointment time too inconvenient

# Outcomes:

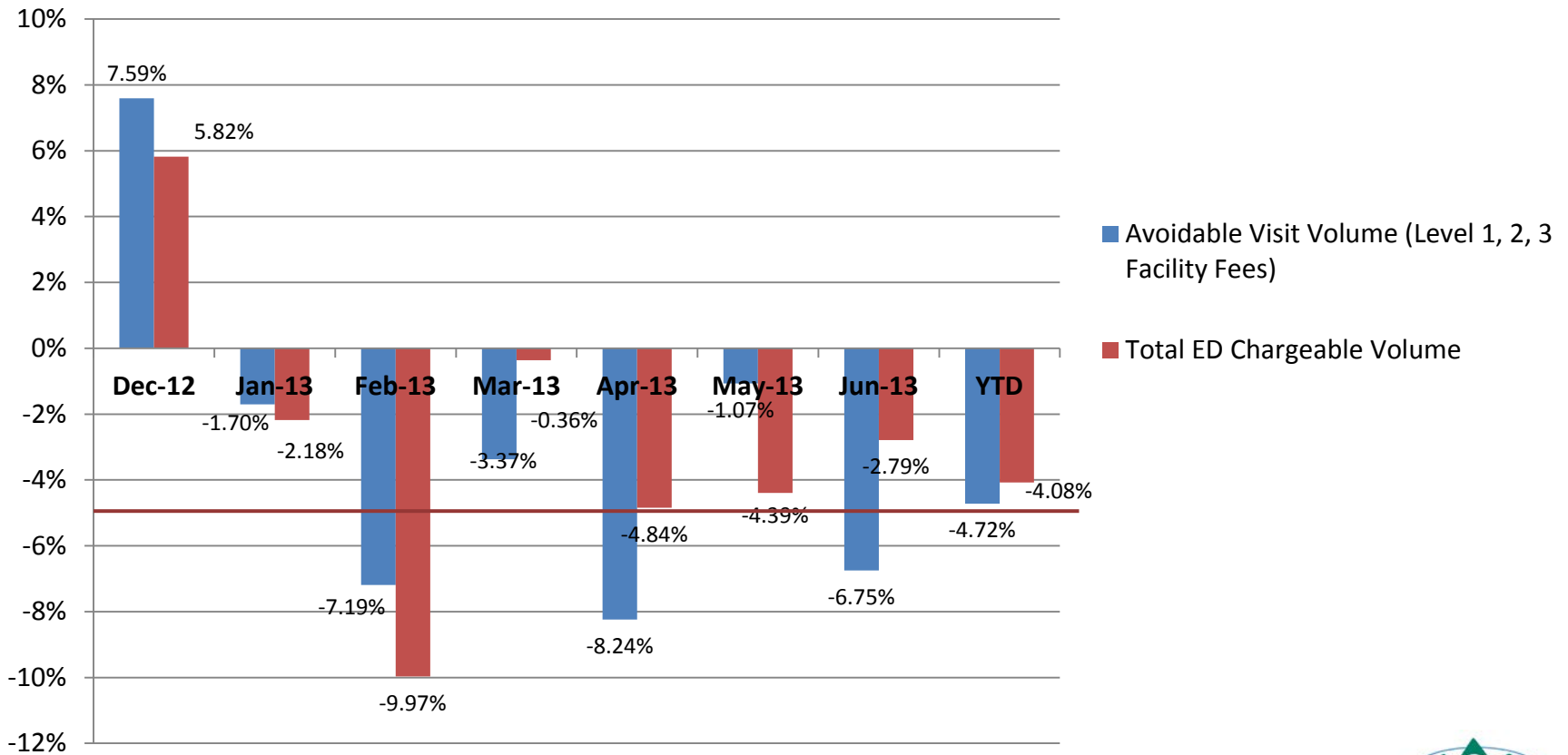
## Our Results - Care Management

### Weekly Pilot Cohort ED Visits



# Outcomes: Our Results

**% Monthly Change in ED Chargeable Volume**  
(as compared to same month in previous year)



# Next Steps

- Continue CM role and expand case load.
- Hold on NP/PA recruitment while we assess data and need for mid-level support.
- Continue to provide data and feedback to Primary Care and NOTCH re: patient (avoidable) visits.
- Continue to partner with primary care within the community to improve transitions (expanded hours and office appointment availability).
- Perform deeper dive into baseline data to understand opportunities to improve our pilot outcomes.
- Explore potential for expanded access to dental care.

## Will You Help Us Make Healthcare in Vermont More Affordable?



\* If your need is not life-threatening or emergent.

### Announcing Our Call First Initiative

As Vermont enters a new era of healthcare, Northwestern Medical Center is working with the State and our community to be even more efficient with healthcare dollars. One way we can improve is through the appropriate use of the Emergency Department. That's why we're asking you to support our "Call First" initiative.

Here's how. When (and only when) you find yourself unsure of whether your medical condition truly constitutes an emergency, take the first step of calling your physician or insurance carrier for assistance with your questions. A doctor's office or the Northwestern Walk-In Clinic at Exit 18 in Georgia might be the right place for your care.

Of course, if you're facing a serious or life-threatening medical condition, you should call 911 immediately or come straight to the Emergency Department. If your need is not life-threatening or emergent and you have questions about where to seek care, call your doctor or insurance carrier. Northwestern Medical Center thanks you for making that call. You will be healthier – and the healthcare system will be more affordable – because of it.



133 Fairfield Street, St. Albans | 802-524-5911

[www.Northwestern.org/call-first](http://www.Northwestern.org/call-first)



# Questions?

